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CONFIRMATION NO. 6910

<b>SERIAL NUMBER</b> 10/521,978	<b>FILING OR 371(c) DATE</b> 01/21/2005 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3768	<b>ATTORNEY DOCKET NO.</b> 1141/73755
<b>APPLICANTS</b> Akiko Shinohara, Chiba, JAPAN; Shirou Oota, Chiba, JAPAN; Takashi Tsukizu, Chiba, JAPAN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP03/09239 07/22/2003 <i>LNL</i>				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2002-212482 07/22/2002 <i>LNL</i>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 15
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>LNL</i>		<b>INDEPENDENT CLAIMS</b> 1		
<b>ADDRESS</b> 23432				
<b>TITLE</b> Medical image diagnosis apparatus				
<b>FILING FEE RECEIVED</b> 1710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	